

MAR 08 2010

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DATE: March 8, 2010

PTO IDENTIFIER: Application Number 10/580,727-Conf. #6468  
Patent Number

Inventor: Henrik Stender et al.

MESSAGE TO: US Patent and Trademark Office

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PAGES (Including Cover Sheet): 15

CONTENTS: Certificate of Transmission (1 page)  
Amendment and Response (12 pages)  
Amendment Transmittal (1 page)

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PTO/SB/97 (09-04)

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Application No. (if known): 10/580,727

Attorney Docket No.: 60218(48497)

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53,624  
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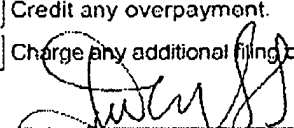
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Amendment and Response (12 pages)  
Amendment Transmittal (1 page)

Customer Number 21874

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AMENDMENT TRANSMITTAL LETTER				Docket No. 60218(48497)	
Application No. 10/580,727-Conf. #6468		Filing Date July 3, 2007		Examiner Not Yet Assigned	
				Art Unit N/A	
Applicant(s): Henrik Stender et al.					
Invention: PEPTIDE NUCLEIC ACID PROBES FOR ANALYSIS OF CERTAIN STAPHYLOCOCCUS SPECIES					
<b>TO THE COMMISSIONER FOR PATENTS</b>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	128	- 128 =	0	x 26.00	0.00
Independent Claims	7	- 7 =	0	x 110.00	0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>					0.00
<input type="checkbox"/> Large Entity <span style="margin-left: 200px;"><input checked="" type="checkbox"/> Small Entity</span>					
<input checked="" type="checkbox"/> No additional fee is required for this amendment.					
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____					
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. 04-1105 as described below. A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> Credit any overpayment.					
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
 Jonathan M. Sparks, Ph.D. Attorney/Agent Reg. No.: 53,624				Dated: March 8, 2010	
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